Seniors' Resource Center (SRC) is a provider of Adult Day, Homemaker, Personal Care, and Non-medical Transportation services. Aside from the in home services, which saw a rate increase in 2015, the reimbursement rates do not cover even half of our costs. The reimbursement rate for a trip that is less than 10 miles covers just over 20% of our cost. This limits the ability to provide rides only to clients that are very close to the destination and are within a route that a vehicle is already scheduled to travel.

In 2015, SRC's cost loss amount was more than \$800,000. The number of billable in home care hours delivered in 2016 fell more than 9%, but non-billable hours increased 8%. It is not uncommon for us to turn down a request for services for an individual that has been approved for 6 hours or more per week because we do not have adequate workforce.

SRC remains a mission-driven community-based organization, but our concern is that, at the current reimbursement rates, we are not able to attract, recruit, and retain a quality workforce. An agency, and a client, expects a lot from a direct care worker, so the wages we can offer directly affects the quality of services. The quality, in turn, is imperative in order to sustain the services our agency provides that are helping keep individuals in their homes and in their communities, where they wish to be. Personal Care services (in Adult Day and In Home services) are quite intimate, and we want to be confident that our workforce feels like this is a real profession, not "just a job," through investing in training and offering living wages.

As an organization, SRC must make difficult decisions regarding a balance between Medicaid services and fee-based services (or other service delivery through other funding streams) that cover full cost. Having to subsidize the funding gap Medicaid creates puts a strain on the organization's ability to meet other critical needs. In addition, many agency staff are insured by Medicaid themselves, so a rate increase that would translate into increased wages for the direct care workers could allow them to cease using Medicaid benefits.

A rate increase also would potentially entice other agencies to become Medicaid providers so there would be greater consumer choice.

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